

Book Reviews

Medical Orthopedics: Conservative Management of Musculoskeletal Impairment. Edited by Rene Cailliet. 217 pp. Chicago, American Medical Association, 2003. \$69.95 (paper). ISBN 1-57947-409-8.

Musculoskeletal complaints account for up to 20% of visits to a primary care physician. Despite this, orthopedic training for family physicians is traditionally under-represented, and many physicians depend on references that provide concise yet comprehensive information regarding the evaluation and management of musculoskeletal disorders. A number of excellent references have been produced in recent years to aid family physicians in treating musculoskeletal disorders.

In this text, the author emphasizes restoring normal function in the treatment of musculoskeletal disorders—an important concept often neglected in the treatment of painful orthopaedic conditions. The text includes a lengthy chapter on the vertebral column and a detailed chapter discussing reflex sympathetic dystrophy. Many clear and simple illustrations are present throughout the book, many of them addressing basic science concepts more distant to the practicing physician.

In general, however, I found the text difficult to read. Sections that would lend themselves well to outline format—such as key presenting symptoms, physical findings, or treatment strategies—are written in paragraph format and are difficult to follow. Differential diagnoses are also not included.

A larger concern relates to what is not included in this text. Many disorders that would be considered common to family physicians—such as knee osteoarthritis, patellar

tendinopathy, rotator cuff tears, and impingement syndrome—are left out entirely. The author uses 25 pages to discuss reflex sympathetic dystrophy but spends only 10 pages to discuss knee and hip disorders combined. In addition, no specific diagnoses in the evaluation of low back pain—such as a herniated disc, spinal stenosis, or spondylolysis—are discussed in detail.

I am also concerned about some of the treatment strategies advocated. The author suggests treatments that are controversial, if not potentially harmful—such as oral steroids in the treatment of rotator cuff inflammation and prolonged immobilization in the treatment of acromioclavicular separations. Many management recommendations are outdated—such as treating an isolated grade III medial collateral ligament tear of the knee with surgery or confirming a meniscal tear by use of computed tomography (or magnetic resonance imaging).

Although the title seems relevant for family physicians, I see little benefit for practicing physicians, residents, or students. The author is well respected, and I commend his emphasis on restoring normal function in the treatment of musculoskeletal disorders. However, I believe the attempt to condense information has provided a disappointing text. Other references available—such as *Essentials of Musculoskeletal Care* (AAOS), *Fracture Management for Primary Care* (Eiff, Hatch, and Calmbach), and *Sports Medicine* (Brukner and Khan)—are more comprehensive, better outlined, and more appropriate for family physicians.

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